

REMARKS

Claims 1, 2, 5, 6, 9, 13, 16, 20, 25, 27-34, 38, 40, 44-50 and 58-60 were pending and rejected. Claims 1, 5, 9, 16, 25, 40 and 58 are being amended. Claims 61-69 are being added. Claims 1, 2, 5, 6, 9, 13, 16, 20, 25, 27-34, 38, 40, 44-50 and 58-69 are now pending. Reconsideration is respectfully requested.

Before discussing the rejections to the claims, Applicant would like to thank Examiners J. Thomas and M. Tomaszewski for the telephone interview of August 30, 2006, during which Applicant's representative and Examiners J. Thomas and M. Tomaszewski discussed the amendments to claim 1 being provided in this response and the scope of the Sata and Joao references. While no agreement was reached, Examiners J. Thomas and M. Tomaszewski indicated that, in view of the above amendments, reconsideration of the rejections is warranted.

In sections 2 and 3, the Examiner rejected claims 1, 9, 13, 25, 27-29, 33, 34, 38, 40, 43 and 45-48 under 35 USC § 102 as anticipated by Sato. Sato describes a wide-area medical information system that includes doctor terminals, patient terminals and a management server. The system enables online examination and treatment. Claim 1, as amended, recites "the virtual clinic being associated with diagnostic centers, each diagnostic center having diagnostic testing equipment for generating diagnostic test results, a particular diagnostic center being other than a treatment-providing facility or a patient's private home" and "obtaining particular diagnostic test results by the particular patient at the particular diagnostic center." Sato does not describe a diagnostic center that is not a treatment-providing facility nor a patient's home. Sato further does not describe obtaining particular diagnostic test results by the particular patient at the particular diagnostic center. Independent claims 9, 25 and 40 as amended contain limitations similar to amended claim 1. Accordingly, applicant respectfully submits that claim 1 as amended is novel over Sato, and respectfully requests the rejection of claim 1 be withdrawn. For similar reasons, Applicant respectfully requests the rejections of claims 9, 25 and 40 and claims 13, 27-29, 33, 34, 38, 43 and 45-48 which depend therefrom also be withdrawn.

In sections 4 and 5, the Examiner rejected 2, 5, 6, 16, 20, 30-32, 41, 42, 44, 49 and 58-60 under 35 USC § 103 as obvious over Sato in view of Joao. Joao teaches a system for providing healthcare information to patients, medical professionals, insurance carriers, etc. Joao does not describe an online examination and treatment center. Accordingly, one skilled in the art would not be motivated to combine Joao with Sato. Regardless, neither Sato nor Joao teaches “the virtual clinic being associated with diagnostic centers, each diagnostic center having diagnostic testing equipment for generating diagnostic test results, a particular diagnostic center being other than a treatment-providing facility or a patient’s private home” and “obtaining particular diagnostic test results by the particular patient at the particular diagnostic center,” as recited in amended claim 1 and similarly recited in amended claims 5, 16, 25, 40 and 58. Sato and Joao state that diagnostic testing equipment may be located at a hospital and that a limited amount of diagnostic testing equipment may be located at a patient’s private home. However, neither Sato nor Joao suggest that diagnostic testing equipment may be located at a center other than a treatment-providing facility or a patient’s private home such as at an apartment complex, workplace, community center, public facility, etc. Applicant respectfully submits that claims 1, 5, 16, 25, 40 and 58 and claims 2, 6, 20, 30-32, 41, 42, 44, 49, 59 and 60 which depend therefrom are nonobvious over Sato and Joao for at least these reasons. Applicant respectfully request the rejections be withdrawn.

In section 6, the Examiner rejected claim 50 under 35 USC § 103 as obvious over Sato in view of SoRelle. SoRelle describes a doctor referral fee. However, SoRelle does not describe “the virtual clinic enabling the patient to access a diagnostic center being associated with the virtual clinic and being other than a treatment-providing facility or the patient’s private home, the diagnostic center having diagnostic testing equipment,” as recited in amended claim 40, from which claim 50 depends. Accordingly, Applicant respectfully submits that claim 50 is nonobvious over Sato in view of SoRelle, and respectfully requests the rejection of claim 50 be withdrawn for at least this reason.


Claims 61-69 are being added. Support for locating the particular diagnostic center in an apartment complex or in a workplace can be found in the specification at paragraph [0059].

Support for locating the particular diagnostic center in a public facility can be found in the specification at paragraph [0047].

If the Examiner has any questions or needs any additional information, the Examiner is invited to contact the undersigned.


Respectfully submitted,

Date: August 31, 2006

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